FEC FORM 1

STATEMENT OF ORGANIZATION

-	FORM 1		ORGANIZATION			FEC MAIL CENTER Office Use Only			
1.	NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4M	5		
G	race for l	New Y	ork						
L	<u> </u>	1_1_1_1_			<u> </u>				
ΑC	ORESS (number and street) (Check if address is changed)		49-04 43rd Av	e .	<u> </u>		11111		
			Woodside			NY 11377			
				CITY		STATE	ZIP CO	DDE	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)									
	(Check if addre	ddroos	gracefornewy	ork@	gmail.com	<u> </u>			
	is change			<u> </u>	<u></u>	<u> </u>			
COMMITTEE'S WEB PAGE ADDRESS (URL)									
	(Check if is change			<u> </u>					
2.	DATE 03 20° 2012								
3.	FEC IDENTIFICATION NUMBER								
4.	IS THIS STATE	EMENT X	NEW (N) OR		AMENDED (A)	· · · · · · · · · · · · · · · · · · ·			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Type or Print Name of Treasurer Sammy J. Kye									
s	ignature of Treasu	rer	/pu	2		Date 0	3' 20' '	2012	
N	OTE: Submission o		eous, or incomplete information ANY CHANGE IN INFORMAT					2 U.S.C. §437g.	
L	Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FC (Revised C		